DATE Paper No.: TO SUBJECT: Certificate of Correction Request in Patent No.: A response to the following question is requested with respect to the accompanying request for a certificate of correction. With respect to the change(s) requested, correcting Office and/or Applicant's errors, should the patent read as shown in the certificate of correction? No new matter should be introduced, nor should the scope or meaning of the claims be changed. PLEASE COMPLETE THIS FORM AND RETURN WITH FILE, WITHIN 7 DAYS. TO CERTIFICATES OF CORRECTION BRANCH - PK 3-915/922 PALM LOCATION 7580 - TEL. NO. 305-8309 THANK YOU FOR YOUR ASSISTANCE! Note your decision by placing a check mark in the appropriate box below, indicating whether all changes requested in the Request for Certificate of Correction should be applied. Please specify which changes should not be applied and indicate the reason(s) for denial, in the "Comments" section below. YES Supervisor Art Unit

NOTICE RE: CERTIFICATES OF CORRECTION